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 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
 valid OMB control number.

22222 U.S. PTO
 09/800284



PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53 (c).

INVENTOR(S)					
Given Name (first and middle (if any))		Family Name or Surname		Residence (City and either State or Foreign Country)	
THOMAS L.		DERRY		EDWARDS, ILLINOIS	
JOSEPH D.		KUNZEMAN		DECATUR, ILLINOIS	
<input type="checkbox"/> Additional inventors are being named on the ____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (280 characters max)					
APPARATUS AND METHOD FOR REDUCING WORK MACHINE NOISE BASED ON LOCATION					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number		<input type="text" value="719"/>		<input type="text" value="Place Customer Number Bar Code Label here"/>	
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ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/> Specification Number of Pages		<input type="text" value="17"/>		<input type="checkbox"/> Small Entity Statement	
<input checked="" type="checkbox"/> Drawing(s) Number of Sheets		<input type="text" value="2"/>		<input type="checkbox"/> Other (specify) <input type="text"/>	
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT (check one)					
<input type="checkbox"/> A check or money order is enclosed to cover the filing fees				FILING FEE AMOUNT (\$)	
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: <input type="text" value="03-1129"/>				<input type="text" value="150.00"/>	
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/> No.					
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are: _____					

Respectfully submitted,

Date

SIGNATURE

REGISTRATION NO.

(if appropriate)

Docket Number:

TYPED or PRINTED NAME John W. Morrison

TELEPHONE (309) 494-1815

USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

This collection of information is required by 37 CFR 1.51. The information is used by the public to file (and by the PTO to process) a provisional application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the complete provisional application to the PTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C., 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Provisional Application, Assistant Commissioner for Patents, Washington, D.C., 20231.

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